



FORM
GD1
(Rev. 5/2013)



HAWAII STATE ETHICS COMMISSION GIFTS DISCLOSURE STATEMENT

(This report covers the period from June 1 of the preceding calendar year through June 1 of this year and is due by June 30)

13 NOV 25 P12:02

FILER

Kent

Last Name

Elizabeth

First Name

STATE OF HAWAII
STATE ETHICS COMMISSION

M.I.

Judiciary/Uniform Law Commission

State Agency

Director/Commissioner

State Position

CONTACT INFORMATION

1746 Akaakoa Street

Kailua, HI 96734

Number and Street or P.O. Box

City

352-2776

Telephone

Extension

State

vested_interest_hi@yahoo.com

Email Address

Zip Code

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

1. Donor: Uniform Law Commission Date Received: 11/20/2013 sbmttd
 Gift (Description): Reimbursement for travel to Commission meeting Value/Cost: \$1250
2. Donor: _____ Date Received: _____
 Gift (Description): _____ Value/Cost: _____
3. Donor: _____ Date Received: _____
 Gift (Description): _____ Value/Cost: _____
4. Donor: _____ Date Received: _____
 Gift (Description): _____ Value/Cost: _____
5. Donor: _____ Date Received: _____
 Gift (Description): _____ Value/Cost: _____

Check here if additional sheets are attached

FILER

Elizabeth Kent

Print Name of Filer (First M.I. Last)

Elizabeth Kent

11/20/2013

Date (m/d/yyyy)

CERTIFICATION: By checking this box, you signify and affirm that you are the person whose name appears as the "Filer" above and the information contained in the form is true, correct and complete to the best of your knowledge and belief. You further certify that you understand that there are statutory penalties for failing to report the information required by Hawaii law.